

O I P E  
AUG-03-2004 14:14 FROM: SUMMA & ALLAN, P.A. 704-945-6735  
AUG 03 2004  
PATENT & TRADEMARK OFFICE  
U.S. DEPARTMENT OF COMMERCE

TO: USPTO

P. 002/003

**PART B - FEE(S) TRANSMITTAL**

Please complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
(703) 746-4000

or Fax

BEST AVAILABLE COPY

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7390 05/05/2004

SUMMA & ALLAN, P.A.  
11610 NORTH COMMUNITY HOUSE ROAD  
SUITE 200, BALLANTYNE CORPORATE PARK  
CHARLOTTE, NC 28277

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

R. Brian Johnson	(Depositor's name)
R. Brian Johnson	(Signature)
August 3, 2004	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/04,575	12/04/2001	Michael J. Collins	1700.89A	6616

TITLE OF INVENTION: METHOD AND APPARATUS FOR RAPID FAT CONTENT DETERMINATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	08/05/2004
EXAMINER	ART UNIT		CLASS-SUBCLASS		
GAKH, YELENA G	1743		436-060000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Summa + Allan, P.A.

2. \_\_\_\_\_

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CEM Corporation

Matthews, NC

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
- Publication Fee
- Advance Order - # of Copies 10

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-203R is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0372 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid Issue Fee to the application identified above.

(Authorized Signature) <i>R. Brian Johnson</i>	(Date) 8-3-2004	08/04/2004 HDERESS2 00000082 10004575
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.		01 FC:2501 665.00 OP
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.		02 FC:1504 300.00 OP
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.		03 FC:8001 30.00 OP

TRANSMIT THIS FORM WITH FEE(S)

G1 P  
AUG 03 2004

2004 14:14 FROM: SUMMA & ALLAN, P.A. 704-945-6735

TO: USPTO

P.001/003

AUG 03 2004

SUMMA &  
ALLAN, P.A.  
PATENT ATTORNEYS



11610 NORTH COMMUNITY HOUSE RD.  
SUITE 200  
BALLANTYNH CORPORATE PARK  
CHARLOTTE, NC 28277  
T: 704.945.6700  
F: 704.945.6735  
W: WWW.PSUMMA.COM

---

FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
Issue Branch	R. Brian Johnson
COMPANY:	DATE:
U.S. Patent and Trademark Office	08/03/04
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
703-746-4000	3
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	1700.89A
RE:	YOUR REFERENCE NUMBER:
Michael J. Collins Ser. No. 10/004,575 12/04/2001	

URGENT     FOR REVIEW     PLEASE COMMENT     PLEASE REPLY     PLEASE RECYCLE

---

NOTES/COMMENTS:

OFFICIAL

The following documents are transmitted herewith:

- Issue Fee Transmittal
- Credit Card Payment Form

CONFIDENTIALITY NOTE

The information contained in this facsimile message is legally privileged and confidential. It is intended only for the use of the above-named individual or entity. If you are the reader of this message and are not the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this facsimile is strictly prohibited. If you have received this facsimile in error, please immediately notify us by phone and return the original message to us at the address above via the United States Postal Service. Thank you.

---

S:\FIRM DOCS\FAX COVERS\PTO-ISSUE.DOC